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A.A.

INAUGURAL ESSAY

ON

Passed March 182

W. D. ROBERTS

BY

Geo. Spackman

PHILADELPHIA.

1828.

THE HISTORY OF THE
CITY OF LONDON

FROM THE FOUNDATION
TO THE PRESENT

BY

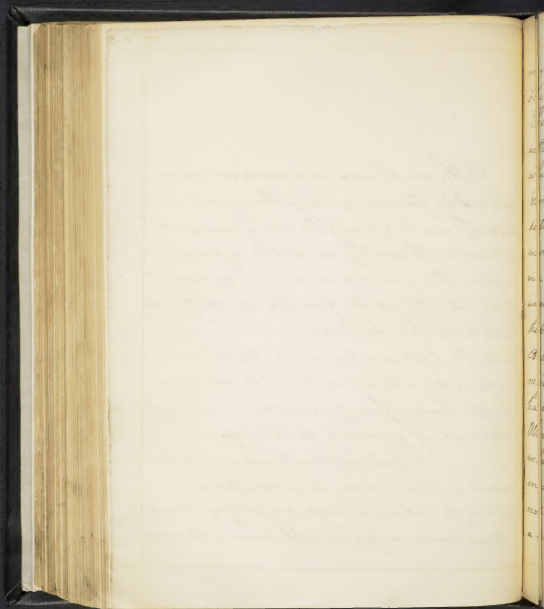
JOHN STOW

AND

WILLIAM

Hydrothorax is a disease more especially found among the aged and intemperate; though sometimes it attacks those of middle age, and even the young are not exempt from it. It is by far the most formidable of the dropsies, and when once it takes a firm hold of an individual, is greatly to be dreaded; though I am far from considering it a disease of general fatality.

That hydrothorax which occurs in the old and intemperate, proves fatal in a large majority of cases, yet under more favourable circumstances, it



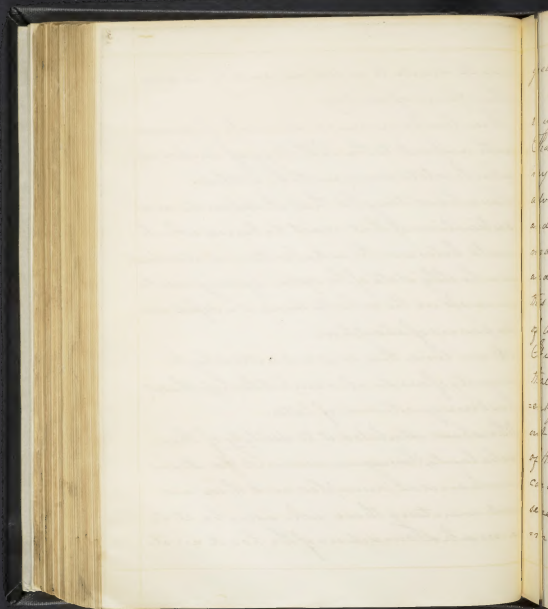
may be made to yield as readily as any other form of dropsy.

There has been much diversity of opinion with respect to the Pathology of dropsies; which still remain to be settled.

Some have taught that it depends on a destruction of that exact balance which exists between the exhalants and absorbents in a healthy state of the system; giving rise to an excess in the exhalations, or a defect in the powers of absorption.

At one time this was admitted by the majority of medical men, but this hypothesis has been questioned of late.

Others have attributed it to debility of the exhalants, Some again, account for it on mechanical principles, and there are not wanting those who ascribe it to a morbid condition of the heart and



great blood vessels.

It would be time misspent for me to undertake the solution of the difficulty. That doctrine which appears best to suit my medical creed has long been advocated and taught by the ingenious and learned Professor of the practice of medicine in the University of Pennsylvania, and much credit is justly due upon this subject to the talents and researches of American Genius.

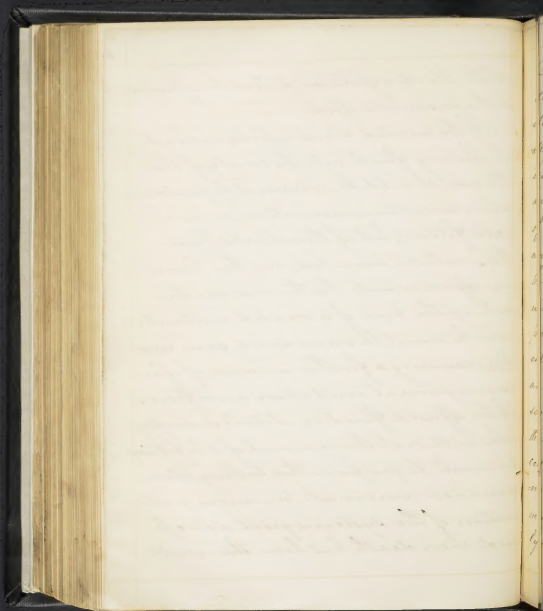
It is maintained by Professor Chapman that the fluid in dropsy is widely different from that which the exhalants pour out in health, and that the real cause of the disease is to be sought for in a condition of things on which this morbid secretion depends; That the proximate cause is an altered state

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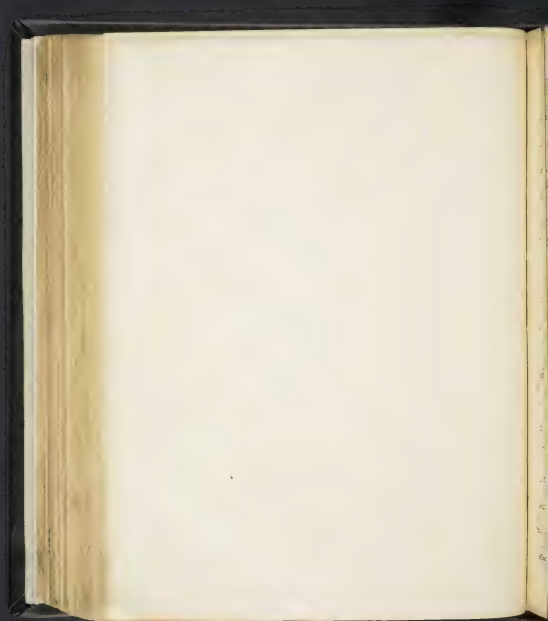
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of the blood vessels, and that the effusion
is the proximate effect.

If the excited blood vessels, instead
of effusing fluid into the cavity of the
thorax, should be relieved by perspira-
-tion or copious urination, a cure
will follow; but if they should have
their action inverted, we then have
an effusion into the thoracic cavity,
acting the part of a morbid irritant,
which must be considered as error
loci, causing a further increase of effu-
-sion, general irritation and fever.
If the effused fluid constituted dropsy,
why will not the removal of it be followed
by a cure? So far from this taking place,
a sudden removal produces prostra-
-tion of the system, great distress,
and even death has been the result.



I believe that there is an altered
state of the blood vessels, usually associ-
ated with acute, though more gener-
ally and more inflammatory, which
existed antecedent to the effusion;
and that this inflammation is
of a peculiar kind: In the serous
and cellular tissues man, pigs
beasts, are inflammatory state
without producing effusion. The
serous membrane may be filled with
extravasated coagula of lymph, &c.
and also the cellular membrane
secrete pus. From this it may be seen that
the serous effusion depends on a
certain degree of intensity of the infla-
mmation; for high inflammatory action
nearly results in an effusion of coagulable
lymph or in the secretion of pus



There is, however, a disease which is the result of an acute, but more common, a subacute inflammation of the serous lining of the lungs; terminating in an effusion of a serous fluid into the cavity of the thorax.

This disease not infrequently results from acute and chronic Pleuritis, Asthma, Pneumonia of aged persons, &c. The symptoms of the disease of the chest are frequently slow and often insidious in their commencement; though often rapid in their course and sudden in their termination.

Among the first symptoms, as well as weight at the lower part of the sternum, difficulty of respiration particularly in bodily exertion. The inspiration quick and with great



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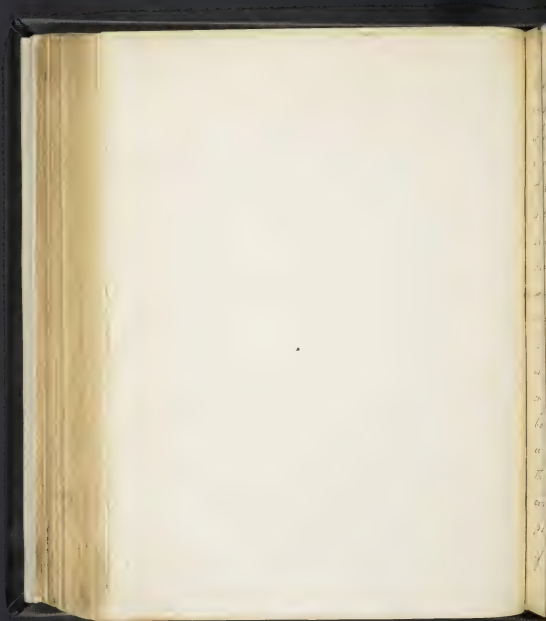
First the expiration slower, without effort.
There is often an inability of lying in
the recumbent position with the head
low; a so much a dishevel of breath as an
ascending height as hills and cliffs
of hairs; oedema of the ankles, sometimes
also of the forelimbs of males, and the cuba
pudendi of women. Can also sometimes
attend which is at first dry, and in
the course of some time becoming moist
and attended with expectoration, fever
and considerable thirst; give a torpid
state of the bowels, with more or less
gastric disturbance. The urine is often
scanty, or is red, and sometimes cragulate
by heat. To these may be added, oedema
of the feet, and a pale altered countenance.
Dreams frequently haunt the chambers
of the patient; and he often starts suddenly



from his sleep, panting and greatly
oppressed in his chest, and the patient
is then alarmed by silent, inspirations
of the heart. Sometimes a number of these
in both arms attend the dinner.

His pulse is frequently very irregular
and intermittent, in parting a pulse
running to the finger, not well described.
The readily increased by the action of cold
in winter. The tongue was not generally
long, much to its usual state.

Under application of the Stethoscope, we have
the respiratory murmur. Scapular, emits a dull
and loud Pectoral in the axilla or is said
to induce great difficulties in respiration.
more copious and a loud wheeze, the
appreciation becomes ineffective and the patient
cannot lie for any length of time in the
recumbent posture, as is often seen in the



in nature; he is frequently
roused from his sleep by frightful dreams,
which greatly agitate his nervous system,
and increase his difficulty of breathing, so
that the unhappy victim of this disease
is compelled to sleep with his shoulders
erected in his bed, and his windows
open to give free access to those there
are convulsive spasms of the muscles dedi-
cated for respiration, producing symptoms
not unlike spasmodic asthma; the heart
is thrown into violent action by coughing
or any sudden exertion. The face now
becomes pale, and the lower jaw appears
widened at the angle; and added to
these, cold extremities and a weak and
evidently intermittent pulse. There is then
pain which extends from the region
of the heart to the insertion of the deltoid.

muscle of the arm both arms. The countenance becomes still paler and the lips have a livid tinge, baricardiac during a paroxysm of dyspnoea at the same time. The respiration is difficult and cannot be continued.

In the latter part of this spasm the pulse is full, attended with tremor, some, and delirium. If the circulation is much interrupted, the vessels are again the vessels bleed, and death may take place, either suddenly or later it does, gives a hope of a short respite in strength. Sometimes no respires during the paroxysm, a paroxysm of dyspnoea, and a very short time during exertion, screaming, and belching. Perturbation during public duties, and it is not uncommon



... to the patient's health.
The causes, producing the first changes
are the same that produce other inflammatory
and diseases, as irritation, congestion, and
inflammation. The vicious habits, im-
moderate indulgence in the
pleasures of ^{the} table, combined with an
indolent state of the body and mind.
Age that beyond the middle period of
life, for at this time there appears to be
a tendency to a plethoric condition or
fullness of the various systems, producing
local congestion, which often result
in inflammation, terminating in
dropical effusions. To these may be
added an obstructed state of
the perspiration.

The remote Cause may have



now is even in an acute pleuritis.
badly treated, or from disease of the
great blood vessels; enlargement and
disease of the heart liver, and
Morison, mislead Goulard repeated
mistakes; asthma, dyspepsia, and
hemorrhage of old people.

Diagnosis There are many
diseases with which hydrothorax may
be confounded, as intercostal
dist. & asthma, enlargement of the
heart, and diseases of the great
blood vessels &c.

These may generally
be distinguished from hydrothorax
by the general history of the disease,
but a clear diagnosis is always difficult.
We must study the case carefully and
carefully in the patient's mind and from



continued visceral obstructions.

Hopes may be entertained of a favourable termination; if we have been called early, and ere the disease has become fixed; also if the patient be of a habit able to bear these debilities.

Post Mortem examinations exhibit various states of disease, in the cavity of the Thorax, and in many organs. The lungs and Pleurae are most of violent inflammation, the adalids are often found, also adhesions between the two lungs, and sometimes tendinous bands are seen tying down the lungs. The heart is sometimes found diseased in its structure, and much increased in its volumes.

The great blood vessels are often found much diseased, and,



at the same time. Four or five or more
sympoms; but each one may be distinguish-
ed by its own permanent character
and by the attending local affection
or tendencies. We also have an enlarge-
ment of one, but it may be on both sides
of the thorax, particularly if the effusion
is copious, and should an abnor-
mal position of the effusion will be on the
correspondent side. It has been said
that Pleurisy is not to occur in Indus-
trious, but this is to be depended on,
it may also be stated that the Pleurisy,
is liable to obstructions, and the same
may be urged against Pleurisy for
a dull sound will be emitted in
consequence of where the lungs are
distended.

In diseases of the heart the patient



and give them in with the best laws
and then leave it to a faculty of
wisdom. It will be best in all cases, to mit-
igate of doubt to resort to all the means
in our possession without confiding to
any one particular set of symptoms,
and with these make a strict
examination into the case.

Therefore, it is unchangeable
when occurring in persons advanced
in life, & in the intemperate
and indolent: Also, if there be much
organic disease of long standing
and produced in a slow and insidi-
ous manner.

The man can but a recover, where
the system has not been destroyed
in force, and intemperate living,
is greatly debilitated in old age and long



verminous seen in one or both sides.

The lungs will be a diseased, and
swollen. As the inflammation runs downwards
the upper part of the lung is found to be more
inflamed, and contains more vermin.
The pericardium is sometimes with
vermin, sometimes long, thin, and, in serious
diseases, found united in a cavity
under the heart. It is white, lined, or
laced with blood, it may be transpa-
rent, or filled with blood, or albuminous,
and mixed with coagulable lymph. It,
in every part. The lungs are void of
air, and the pleura if it has not shed
blood, instead of serum, will be
found thickened, with red points.

The pleura is often found much
thickened, and the abdominal
viscera also much diseased.



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respiration, & excited pain in the side,
and the blood vessel seems to be
inflamed; for as soon as the inflammation
of the lungs continues we are not
to attend to the existence of pain,
and instead of blood will come

to the surface can not remove
respiration of the lungs, and in other
words, the blood vessel, we must then
use a local application of leeches
and scarification.

Leeching is by far the best mode
of employing local abstraction in this
form of inflammation, it will not
suffice in the case of this disease.

Cramping blood by cupping is
particularly, a valuable hygienic
to the lungs & surrounding tissues
will also be found serviceable here.



After the inflammation subsides there
remains what is called the scab
and it is not difficult to see that it
will be removed.

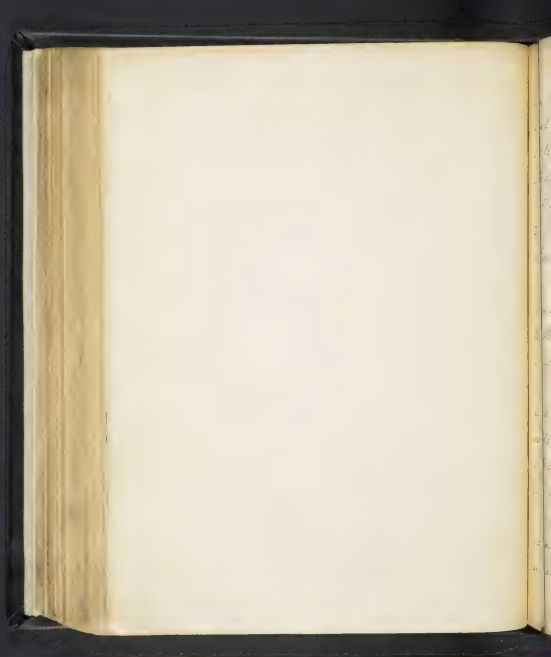
But what more may be said
with respect to the use of blisters
in the treatment of
the disease. It may be applied
directly to the part of the chest,
between the shoulders, or to the
lower part of the chest, which
is a dangerous part at the same time.
Keep up irritation on the chest
of the thorax, then act on the
to be removed to some, and again
applied; and thus repeated as the
inflammation demands. There is no
great advantage in this last mode
of employing blisters; it gives us



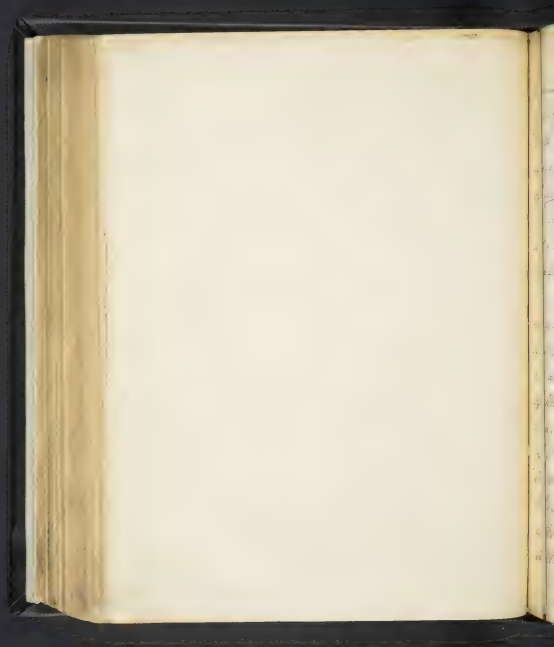
an opportunity, introduce dry and
wet cupping: in this way we may
alternate our local applications.
I have found this plan well suited
to the chronic form of the disease, and
to those cases of hemorrhoids, in
which it is not
absent without

Use. The local application
has been also recommended. I allude
to the external application of the
Tribute of arsenic and Borax,
in the form of an ointment. This
is a very effective mode of producing
external irritation, and I presume
that it is as good for the surface of
the body.

Opium has been highly
recommended by some Physicians,
and may be useful in some cases.



I have considered in part of the subject
 in regard to the importance of general
 and local blinding over all other
 methods recommended, in the case
 of high blindness. And more than
 twenty years ago and more generally
 adopted and used since the most
 tasteful of any of the forms of blinding
 & I believe we have not the influence
 and the good things created the various
 actions in a considerable degree.
 we are to resort to Division. The best
 of this class of remedies are Rockwell's
 Pills, Dr. Williams' and S. L. L. Pills.
 The first of these is given
 in combination with calomel.
 Mrs. F. L. and the Pills combined
 with the Salts of Epsom and
 Antimony, given the Silicious Pills.



It is best always to use the escharotic
powders after bleeding, to reduce any
inflammation which that may remain,
and thus restore the system to the
solid and rational: two grains of
the Powder of Sulphur and Sassafras
of Raimon, in each a little
powder, may be given three times
a day, until the month becomes
lighter than before; then the Rational
must be omitted and the Sulphur
continued for a short time after
the occurrence of a slight saturation;
we shall find the symptoms recede
and the condition of the patient much
improved.

We shall now find the Sulphur to
exert its influence on the urinary organs,
causing a free discharge of urine which



Scilla is a nice menton
 relief of every disorder of the
 mind & cure of the disease.

It is said to disordered in the
 spirit and caused after a fall but
 we may then resort to other remedies, as
Scilla and *Scilla*.

The use of these articles is necessary
 to these cases accompanied with a cold
 there weat & pain are of great considera-
 tion and it will be found with a lab-
 or is cases of the atonic form, and it
 is well suited to persons of delicate
 constitutions.

Scilla may be given alone or
 combined with *Scilla*, *Scilla* or
 Adote of Potash: the dose, alone or in
 combination, is half a grain, which
 may be gradually increased to two



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seems that there is some in that view
it is not a matter.

On the matter of the evidence in the
case of the plaintiff, it is evident that it is
not in the nature of the evidence that it
will be sufficient to show that it does
not produce decided effects in the
case of the plaintiff, it should be discontinued
in a few days, and if no evidence is
afforded of its effects on the system, we
may then begin its administration
in a more systematic manner with the
quantity first given, and if it is
sufficiently long to do so.

There is no more than a few
to act like a charm, and expects
discharges of urine with an amelioration
of all the urgent symptoms result.





If we find stimulants not to relieve
the patient, we may resort to purgatives,
which in the condition of mind
and the general action of the system
is the more proper.

Purgatives of a drastic nature
are generally resorted to as Calomel,
Croton oil, Gum Scammony, and the
compound powder of Ipecac.

As a general rule, no benefit
will result from active purging in
any of the diseases of ^{the} chest. mild
laxatives are all that are required;
and throughout the treatment of
Hydrothorax, the patient's bowels
should be kept regular.

As the lungs are often affected
by inflammation, phlegm or mucus
is apt to collect in the bronchial tubes,



which is due to partial aneurysm.
To meet this indication, emetics and
expectorants are to be administered; but
it will seldom be necessary to resort to
phlebotomy in this disease.

Among the class of expectorants,
those possessing diuretic powers should
be preferred, as the Smilax, Terebinthina,
garlic, and Ipecacuanha.

When a tonic expectorant is indicated,
the Cassia Seed will be found
very efficient, and is particularly suited
to the chronic form of the disease.

The Ipecacuanha, in nauseating doses,
will be very useful where there is an
asthmatic tendency and want of
expectoration.

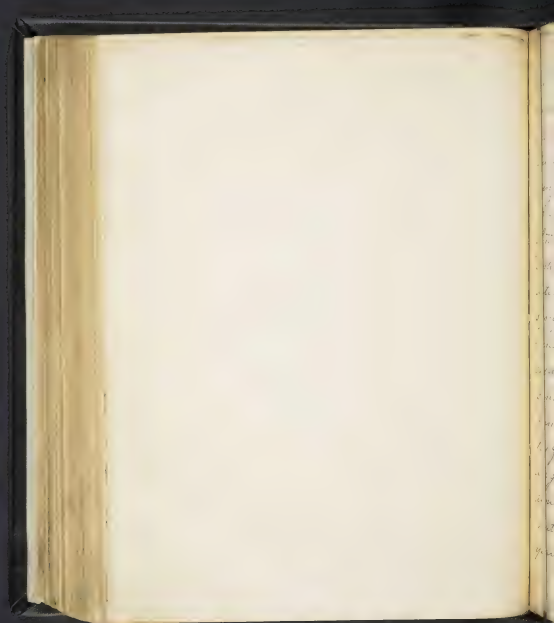
Should we have failed to relieve
our patient by local and general



blood letting, purgatives, diuretics, mercury
low diet, and repeated blistering,
we may then try the effects of Kelpin's
oil, without undoes the influence of
nauseating doses of emetics, &c. a few
days: by this plan of treatment the fluid
has been gradually removed and
a cure thus effected.

It is important, throughout the
treatment of hydrothorax, to keep
the lower extremities neatly bandaged
in a roller of muslin, particularly if
much swelled.

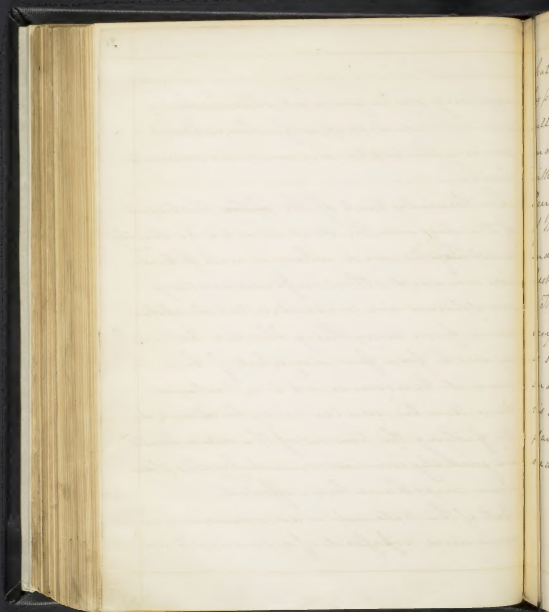
No relief being obtained, and
the symptoms becoming very severe, and
the life of the patient in immediate
danger, we may attempt relief by
the operation of Paracentesis Thoracis,
provided fluctuation of the fluid be



aided. I shall conclude this essay by making some general observations upon the diet proper for the patient during the treatment and his convalescence.

In the early part of the ~~of the~~ treatment of the disease, the diet should be strictly antiphlogistic, and where much febrile action and other inflammatory symptoms are present, a total abstinence from everything should be enjoined for a few days; but if this cannot be acquiesced in, Barley or Gum Arabic water may be allowed. By fasting the powers of the absorbents are greatly increased, and by this plan alone cures have been effected.

But if the patient is advanced in years and possessed of a constitution



shattered by intemperance or weakened by previous disease, a nourishing diet will be demanded, Eggs, Oysters, Jellies, and plain broths may be allowed; with the free use of fluids, as Juicer Berry tea, Beane of Tartar whey, and if the patient be a drunkard, Gin and water may be taken, but the best drink is pure water.

The convalescent patient should be very guarded in his habits of living, as slight deviations from temperance and moderation, may renew all his sufferings. Let him partake of plain and simple food, and by all means avoid Stimuli of every kind.

-Fines-

